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Amendments to the Specification:

Please replace paragraph [0004] with the following amended paragraph:

[0004] Spinal cord injury is defined as an injury of spine or spinal cord, and depending on its nature, is classified in open injury (caused by puncture wound, gunshot wound) and closed injury. Most of spinal cord injury are closed injury. In most cases, spinal cord is injured by spine fracture or by a force associated with dislocation. It, however, is ~~some time~~ sometimes injured by a simple hyperflexion or hyperextension of spinal cord. In many cases, spinal cord injury is found in the cervical vertebrae-thoracic vertebrae transition and the thoracic vertebrae-lumber vertebrae transition. Spinal cord injury is traditionally classified in spinal cord concussion, spinal cord contusion, rupture, and spinal hemangioma (see Current Medical Dictionary, Ishiyaku-shuppan Kabushiki-Kaisha). [Spinal cord contusion means a structural injury of spinal cord. Complete separation of dura mater from spinal cord is considered the highest level of the primary injury, however in most cases, no rupture is found in dura mater. Depending on the severity of the secondary injury, such as hemorrhage from spinal cord, edema, developed after the primary injury, kinesthesia paralysis, visicorectal disorder, or autonomic disorder below the level of the injured site takes place, which is under the condition of incomplete separation (see Current Medical Dictionary, Ishiyaku-shuppan Kabushiki-Kaisha).

Please replace paragraph [0005] with the following amended paragraph:

[0005] The severity of pain or spasticity caused by spinal cord injury normally increases in days [a] at lower temperature or in low atmospheric pressure, and in such situation, the pain is keen and hard to keep self-controlled.

Please replace paragraph [0028] with the following amended paragraph:

[0028] The daily dosage may be 5 to 500mg, the inhibitor may have an IC_{50} at less than ~~400nanomolar~~ 100 nanomolar, and may have a selectivity ratio in excess of 100.